



**DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF UNDERGROUND STORAGE TANKS
401 Church Street, 4th Floor L&C Tower
Nashville, Tennessee 37243**

For official use only
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APPLICATION FOR APPROVED CORRECTIVE ACTION CONTRACTOR STATUS

(Type or print)		
Check Appropriate Box:	<input type="checkbox"/> Company	<input type="checkbox"/> Individual <input type="checkbox"/> Tank Owner
Company Name: _____		
Company Principal: _____ Company Phone: _____		
Address: _____		

Company Contact: _____ Contact E-Mail Address: _____		
Company Website: _____		
TN Contractor License Number (if applicable): _____		

The following information shall be submitted and updated annually:

1. All applicable license(s) and registrations pursuant to Rule 1200-1-15-.09(15)(b), part 3 (i) and (ii).
2. Certification of liability insurance coverage of the types and in the amounts described in Rule 1200-1-15-.09(15)(b), part 4.
3. A current and alphabetized list of the employees to be used by the CAC in the assessment and remediation of underground storage tank sites in Tennessee including the employee's title, degree(s), date of graduation, professional registration(s) in Tennessee and license number, job description, office location and telephone number, pursuant to Rule 1200-1-15-.09(15)(b), part 5.

I, THE UNDERSIGNED, HAVE READ, AFFIRM THAT I UNDERSTAND, AND AGREE TO ABIDE AND COMPLY WITH ALL THE PROVISIONS UNDER RULE 1200-1-15-.09(15) OF THE TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION.

I DO SWEAR OR AFFIRM UNDER PENALTIES OF PERJURY THAT THE STATEMENTS ABOVE ARE TRUE AND CORRECT.

Applicant's Signature

Date

State of _____
County of _____

Personally appeared before me, _____, with whom I am personally acquainted, and who acknowledged that he or she executed the within instrument for the purpose therein contained.

Witness my hand, at office this _____ day of _____, _____.

Notary Public

My commission expires: _____